

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
 AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

FILED
 Jul 29 1998 8:00am
 Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # F97000002749 (6)
 1. Corporation Name
AMERICAN DESIGN GROUP, INC.



Principal Place of Business 1007 Shotgun Road Sunrise, Florida 33326	Mailing Address 1007 Shotgun Road Sunrise, Florida 33326
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/23/1997	
21	26	4. FEI Number 94-3140050		Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
22 City & State		27 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
23 Zip		28 Zip		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Country		29 Country		30	

9. Name and Address of Current Registered Agent
RUBEN, DAVID A
1007 Shotgun Road
Sunrise, Florida 33326

10. Name and Address of New Registered Agent

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	FL
83	
84 City	

11. Pursuant to the provisions of sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, section 607.0505, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	RUBEN, DAVID A	
STREET ADDRESS	1007 Shotgun Road	
CITY-ST-ZIP	Sunrise, Florida 33326	
TITLE	TSD	<input type="checkbox"/> DELETE
NAME	LIM, ALBERT	
STREET ADDRESS	17815 SKYPARK CIR STE B	
CITY-ST-ZIP	IRVINE CA 92614	
TITLE	C	<input type="checkbox"/> DELETE
NAME	LU, ANDY	
STREET ADDRESS	1007 Shotgun Road	
CITY-ST-ZIP	Sunrise, Florida 33326	
TITLE	VO	<input type="checkbox"/> DELETE
NAME	LU, CLAYTON	
STREET ADDRESS	1007 Shotgun Road	
CITY-ST-ZIP	Sunrise, Florida 33326	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	1000026060
5.3 STREET ADDRESS	-08/03/98--0111--000
5.4 CITY-ST-ZIP	***150.00
6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: _____ 7/9/98 714-253-8020

CR2E034 (5/98)



American Design Group

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7/6/98

Division of Corporations
Annual Reports Filings
PO Box 1500
Tallahassee, FL 32302-1500

Re: Annual Report Filing Fee, Document# F97000002749(6)

Dear Sir or Madame:

We just received your second notice for the Annual report filing fee. This is the first time we have ever received the notice from you. Please waive the late fee. Enclose is a check of \$150.00 for the annual report filing fee.

Please note that our Florida office's address has been changed to :

AMERICAN DESIGN GROUP
Sales & Marketing Office

1007 Shotgun Road
Sunrise, Florida 33326

Thank you for your assistance.

Sincerely,

Hope Larsen
Office Manager